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DHHS FOR OGHA, CDC ATLANTA FOR STEVE BLOUNT, USAID FOR  
GH/KENT HILL AND KEN YAMASHITA

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TAGS: [ECON](#) [SOCI](#) [PGOV](#) [PREL](#) [SF](#)  
SUBJECT: HEALTH MINISTER'S RETURN RAISES QUESTIONS ABOUT  
GOVERNMENT HEALTH POLICY

REF: 06 PRETORIA 04320

Classified By: Deputy Chief of Mission Don Teitelbaum for Reasons  
1.4 (b) and (d)

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Summary  
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11. (C) Controversial and ailing Minister of Health Dr. Manto Tshabalala-Msimang received a successful liver transplant in March. For the last several weeks, there have been reports about the return of Dr. Tshabalala-Msimang to her duties as Minister of Health. Most of the South African health community believes Dr. Tshabalala-Msimang should be replaced. Meanwhile, a new, highly positive National Strategic Plan (NSP) for HIV and AIDS has been promulgated in Dr. Tshabalala-Msimang's absence. PEPFAR is also being called upon by the Ministry of Health to become an active partner in the implementation of the NSP. Dr. Tshabalala-Msimang's illness, sudden liver transplant and

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difficult recovery appeared to be an opportune excuse to allow her to gracefully leave the scene. However, recent sightings by Embassy contacts confirm that Dr. Tshabalala-Msimang's recovery had been faster than

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anticipated and that she is coming back in the office for two to three hours each day. The South African health community is waiting to see what will happen next. This is the last opportunity President Mbeki will have to gracefully remove Dr. Tshabalala-Msimang by citing his deep concern for her health as the justification for her removal. If she is allowed to fully resume her responsibilities, that opportunity will be lost. The implementation of the NSP, several public careers and the lives of millions of HIV/AIDS victims may depend on his decision. End Summary.

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The Minister Is Back  
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12. (U) Controversial and ailing Minister of Health Dr. Manto Tshabalala-Msimang suffered from a serious liver disease in

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late 2006 and early 2007 and received a successful liver transplant in March. As a result of her illness, she has been out of office and away from government health policy for several months. In her absence, health issues have taken a

definite turn for the better under the shared leadership of Deputy President Phumzile Mlambo-Ngcuka, Transportation Minister and Acting Health Minister Jeff Radebe, and Deputy Minister of Health Nozizwe Madlala-Routledge.

13. (C) For the last several weeks, there have been reports about the return of Dr. Tshabalala-Msimang to her duties as Minister of Health. According to these reports, she has been receiving periodic briefings on Ministry matters at her home since she left the hospital in March. She has also gone to the Ministry to receive short briefings. There has been no official statement concerning Dr. Tshabalala-Msimang's return, and Acting Minister of Health Radebe and others continue to make statements suggestive of a positive new direction for the Ministry on HIV/AIDS.

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The Nature of the Problem  
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14. (C) Most of the South African health community believes Dr. Tshabalala-Msimang should be replaced. It is difficult to take the South African government's health policy seriously while she is at the helm in the Ministry of Health. President Mbeki's apparently unconditional support for her is based on the fact that they were long-time comrades in exile and the fact that her husband, Mendi Msimang, is the Treasurer of the ANC. President Mbeki is notoriously loyal to those who struggled with him during the long years of anti-apartheid struggle.

15. (C) Dr. Tshabalala-Msimang has always been a source of embarrassment, above all among the serious medical and research community and committed NGOs. She has also annoyed other ministries, such as the Ministries of Education, Social Development and Treasury, that are interested in working on HIV/AIDS issues, but are constrained by her opposition to PEPFAR. She has also been a frequent target of ridicule by domestic columnists and cartoonists. Dr. Tshabalala-Msimang went international at the UN AIDS Conference in Toronto in August last year when she set up an HIV/AIDS both that was

stocked with fruit and vegetable remedies such as garlic, lemon, African potatoes and beetroot (beets) and eschewed antiretroviral drugs (ARVs). She subsequently became known as "Dr. Beetroot." The international furor that followed caused the government to start emphasizing the role of the Deputy President as the head of the South African National AIDS Council (SANAC), a larger umbrella organization, while downplaying Dr. Tshabalala-Msimang's authority. A new SANAC membership, which now includes more private and NGO participants, was appointed under the Deputy President's leadership on April 30. The new membership was formed during Dr. Tshabalala's absence, but it is not known to what extent she was involved in the process. (See reftel for Embassy reporting on the criticism of Dr. Tshabalala-Msimang's behavior in Toronto.)

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What Is At Stake  
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16. (C) Meanwhile, a new, highly praised HIV and AIDS and STI Strategic Plan for South Africa 2007-2011, more commonly known as the National Strategic Plan (NSP), has been promulgated in Dr. Tshabalala-Msimang's absence. This plan drew on the broad talents of the South African government, donors, and international and national NGOs, including the Treatment Action Campaign (TAC). The NSP has been adopted and approved by SANAC and the Cabinet. The new SANAC membership strongly endorsed this new course on addressing HIV/AIDS in the country. The NSP also seeks the collaboration of all partners and represents a change from the Ministry of Health's former "go-it-alone" approach to the HIV/AIDS crisis. PEPFAR, through the CDC and USAID, is also being called upon by the Ministry of Health to become an active partner in the implementation of the NSP. PEPFAR members continue to meet with the Ministry of Health and

other partners to identify appropriate ways to be helpful.  
This collaborative spirit may change if Dr.  
Tshabalala-Msimang returns and decides on a different pathway

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to implementation.

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Uncertainty About the Future  
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¶7. (C) Dr. Tshabalala-Msimang's illness, sudden liver transplant and difficult recovery appeared to be an opportune excuse to allow her to gracefully leave the scene and speculation abounded regarding who could replace her. Local sources initially talked about President Mbeki appointing her former Deputy Minister, Ayanda Ntsaluba, who left to become the Director General of the Department of Foreign Affairs on 2003, and who reportedly left because of personal differences with Dr. Tshabalala-Msimang. More recently, they have mentioned the current Deputy Minister, Nozizwe Madlala-Routledge, but she remains marginalized because of her bold statements last year against Dr. Tshabalala-Msimang's ARV policy.

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¶8. (C) The Mail & Guardian reported on May 12 that President Mbeki had intended to name Acting Minister of Health Radebe as Minister of Health and then name KwaZulu-Natal Province Premier S'bu Ndebele as the new Minister of Transport, taking advantage of his previous sterling performance as Minister of Transport in KwaZulu-Natal in 1994. This plan reportedly floundered over President Mbeki's difficulty in finding someone to replace Ndebele in politically fragile KwaZulu-Natal. This report was confirmed to poloff on May 18 by political analyst Aubrey Matshiqi who writes for the Mail & Guardian. Matshiqi also heard that Dr. Tshabalala-Msimang was not doing well, despite her "return." He also believes that her return would have little impact, since the positive changes that have been taking place in recent months began before her illness forced her to stay at home. Finally, Matshiqi believes that Dr. Tshabalala's family needs to speak to her and ask her to stop

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working.

¶9. (C) However, recent sightings by Ministry of Health contacts confirm that Dr. Tshabalala-Msimang's recovery had been faster than anticipated and that she is coming back in the office for two to three hours each day. She also works out of her home and has been successful in getting people to come to her home. Some of the Embassy's health community contacts believe that Dr. Tshabalala-Msimang will return -- to save face -- but will only stay for a couple of months before she steps down. Their feeling is that a liver

transplant at age 66 would slow anyone down -- even her. According to Dr. Tshabalala-Msimang's spokesperson, Sibani Mngadi, she is expected back in the office in the next two weeks, as she is scheduled to give the national health budget speech at the opening of the annual HIV/AIDs conference in Durban in early June.

¶10. (C) There have been conflicting reports in the newspapers about the content of alleged meetings between ANC Treasurer Mendi Msimang and President Mbeki since Dr. Tshabalala-Msimang fell ill. The City Press reported that

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Msimang had asked Mbeki to release his wife because of her illness. However, the Mail & Guardian reported that Msimang intervened to force Mbeki to reverse his decision to release Dr. Tshabalala-Msimang, saying it was unfair to his sick wife as Mbeki had never released any other minister on medical grounds. This week Msimang reportedly denied interfering with Mbeki's plans, saying it was not up to him to tell the

President how to compose his cabinet. (Comment. There have been several past ministers who were ill and who were allowed to remain/die in office. These include late Security Minister Steve Tshwete, late Public Works Minister Stella Sigcau, and former Transport Minister Dullah Omar. End Comment.)

¶11. (C) There was a major consultative meeting of health community officials in Johannesburg on May 8 to discuss the NSP. This meeting was undermined by Dr. Tshabalala-Msimang's reported return to the office on the same day. Acting Minister Radebe, Deputy Minister Madlala-Routledge, Director General Tami Mseleku and a number of lower level Ministry of Health officials had been expected to participate in the meeting. However, only Deputy Minister Madlala-Routledge arrived. It was later reported that Dr. Tshabalala-Msimang had come to her office and that everyone but Deputy Minister Madlala-Routledge was afraid to leave their offices as long as Dr. Tshabalala-Msimang was in the building. Dr. Tshabalala-Msimang reportedly left her office at 11 a.m.,

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after which the intimidated Ministry of Health officials began to trickle into the meeting.

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Rapidly Approaching a Decision Point  
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¶12. (C) The South African health community is waiting to see what will happen next. This is the last opportunity President Mbeki will have to gracefully remove Dr. Tshabalala-Msimang by citing his deep concern for her health

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as the justification for her removal. If she is allowed to return and fully resume her responsibilities, that opportunity will be lost. The fate of the NSP, several public careers and many lives may depend on his decision.  
End Comment.  
TEITELBAUM